

CLAIMS ONLY							Application Number 101715096		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	/										
2		/									
3		/									
4		/									
5		/									
6		/									
7		/									
8		/									
9		/									
10		/									
11		/									
12		/									
13		/									
14		/									
15		/									
16	/										
17	/										
18	/										
19	/										
20	/										
21	/										
22	/										
23	/										
24	/										
25	/										
26	/										
27	/										
28	/										
29	/										
30	/										
31	/										
32	/										
33	/										
34	/										
35	/										
36		/									
37		/									
38	/										
39		/									
40		/									
41		/									
42		/									
43		/									
44		/									
45		/									
46		/									
47		/									
48		/									
49		/									
50		/									
51		/									
52		/									
53		/									
54		/									
55		/									
56		/									
57	/										
58		/									
59		/									
60		/									
61	/										
62		/									
63		/									
64		/									
65											
66											
67											
68											
69											
70											
71											
72											
73											
74											
75											
76											
77											
78											
79											
80											
81											
82											
83											
84											
85											
86											
87											
88											
89											
90											
91											
92											
93											
94											
95											
96											
97											
98											
99											
100											
Total Indep	3							Total Indep	1		
Total Depend	88							Total Depend	12		
Total Claims	31							Total Claims	13		

13
44